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SUPPOSED INFLUENCE OF TOBACCO AS AN ANTIDOTE TO ARSENIC.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—The first of the following communications I received a few weeks since from Dr. Skilton, of Troy. At his suggestion, and as I deemed the case an interesting one, I laid it before the Boston Society for Medical Improvement. Doubts were expressed by some members as to the fact of any arsenic having been taken. These doubts I communicated to Dr. S., with a request for further evidence, if he could give it, upon the point at issue; and I likewise asked him to state the facts in regard to other similar cases to which he had drawn the attention of the Society in June, 1841, but of which the records of the Society gave very imperfect details. Notwithstanding Dr. S. considers his communications are prolix, I prefer to send them to you exactly as he wrote them. The subject, even as a mere suggestion, is of sufficient importance to allow of details of trivial matters.

Yours, HENRY I. BOWDITCH.

Boston, July 7, 1851.

Mrs. P—, aged about 32, mother of three children, obtained two drachms of arsenic of commerce, of an apothecary. She took it all, mixed with a viscid fluid, about 2, P. M., April 23, 1851. Dr. Bontecou was immediately called. He arrived in fifteen minutes. Her symptoms were extreme thirst, heat at the stomach, and vomiting. The stomach contained no food, as she had eaten nothing since breakfast, and had been actively employed up to the time of taking the poison. The patient rejected all treatment, and Dr. B. observing her frequent applications to a vessel of cold water, threw into it a large dose of tartar emetic, and hastened home for a stomach-pump.

During his absence, at half past 2, I arrived. The thirst and heat at the stomach were increasing, with pain and constriction at the upper part of the oesophagus, pain at the epigastrium, with violent cramps at the stomach, of a peculiar kind. Vomiting frequent. The practice already commenced was intended to embrace, in addition to the emetic course, whites of eggs, mucilage, afterwards anodynes, then laxatives, and, if necessary, the stomach-pump as an auxiliary, with whatever other treatment might seem called for. Having hastily prepared an infusion of tobacco, I proposed it as a main reliance. It was adopted, without, however, omitting albumen and mucilage of elm. The matters rejected

by the frequent vomiting appeared to be a mixture of the above-mentioned articles, bearing quantities of a white powder believed to be the arsenic.

The demands of our patient for cold water were incessant and urgent. She drank often of it, and vomited frequently. The dread of the stomach pump, and the promise of cold water, induced her to drink largely of the tobacco infusion. She drank, probably, three pints before 6 o'clock, the hour of my second visit. Up to that point of time, the cramps were increasing in violence, but the skin and tongue were natural, as was the pulse.

6, P. M.—There was no prostration; she vomited less often; great tenderness at the epigastrium; headache. The other symptoms remained with little change. Treatment—mucilage, cold water, and a strong infusion of the tobacco, a tablespoonful every half hour.

8, P. M.—The tenderness at the epigastrium, with the heat and thirst, not on the increase. She vomits only from the attempt to swallow the nauseous infusion. The cramps a little less severe; the pulse natural; headache; drowsy and chilly by turns. At other times she "felt first rate." Dr. Clapp, the family physician, saw her with us, and urged us to a continuance of the same course. Give a teaspoonful of strong tobacco infusion every half hour. Sinapisms, which had previously been used, were renewed.

10½, P. M.—Dr. C. again met us, as also Dr. Brinsmade. Pulse still natural; tongue slightly swollen, not red. All the symptoms continue, though much abated in violence. She sometimes expresses herself better. The headache, however, supposed to be the effect of the tobacco, is no better.

The danger appears to be past, and all the physicians express full confidence in the tobacco as the important agent in her relief. Hitherto laxatives were avoided, with the intent of combating the poison chiefly in the stomach, without urging it over any other portion of the mucous membrane. Continue the same treatment, giving a teaspoonful of the infus. tabac., once in one half or three fourths of an hour, mixed with mucilage, because the taste seemed to induce vomiting. As the *modus operandi* of the remedy was far from being settled in our minds, it was deemed prudent to continue it longer, that it might ward off rigidity and paralysis, if it should prove to possess any such power.

April 24th, 8, A. M.—The patient had slept from 2 till 6 o'clock. Feels comfortable, though there is considerable soreness at the epigastrium felt on pressure. Complaints of headache and drowsiness on being questioned; no vomiting; the pulse natural; the tongue slightly swollen, and a little reddened; the thirst and heat in the oesophagus and at the stomach nearly gone. Has had two dark stools—the first chiefly solid, and with no peculiar sensations; the second thinner, flocculent, greenish, and occasioning smarting at the anus. Give a dose of castor oil, and repeat the infusion once an hour; it had been discontinued since she fell asleep.

2, P. M.—Very little uneasiness at the stomach. The heat, thirst

and stomach tenderness not all gone. No vomiting; pulse natural. Has had three or four stools, greenish and producing smarting. Gave the small dose of the infusion once in three hours.

7, P. M.—Feels almost well; has appetite; calls for cracker panado, which is allowed.

25th, 12, M.—Feels well. Took some rare-boiled eggs.

26th, 11, A. M.—Feels quite well, and is actively employed at hard work.

In this case we note, the arsenic taken on an empty stomach, producing the usual severe symptoms, which lasted for several hours; the striking character of these symptoms, wanting, however, in regard to the effects on the pulse, both primary and secondary, as nothing was observable in it that indicated inflammation. During the same period we note, the large quantity of the narcotic poison administered without prostration. It is doubtful, even, whether the tobacco aided in producing emesis, except from its disagreeable influence on the fauces and other organs of taste. We note, the smarting produced by fecation. Most of all, we are to regard the rapid recovery. In twenty-nine hours, appetite returned; in forty-six hours, she took boiled eggs; in sixty-four hours, she resumed her usual labor in health.

The discussions on this case, which took place at a late meeting of the Troy Medical Association, have led me to adopt the following theory of the *modus operandi* of tobacco as an antidote to arsenic. And that it is a sufficient, an effectual antidote, I have become satisfied. Arsenic kills by first exciting inflammation of the stomach; at least so it is in all cases where it is introduced into that viscus. Tobacco, a powerful, sedative narcotic, probably acts by benumbing the nerves of the stomach, and thence preventing or curing inflammation of the mucous coat of the organ.

It may be further inferred that the abundant secretions of the mucous membranes, excited by the narcotic, tend to prevent the absorption of the mineral poison.

A. J. SKILTON.

P. S.—We used two ounces of tobacco in making the infusion; of the last ounce, one third of the infusion may have been left unused.

[The following is the second communication received from Dr. S., and it was written, as I have stated, in consequence of doubts having been expressed whether it was that possible Mrs. P. could have taken the amount of arsenic stated by Dr. S. (viz., 3ij.) and have lived.]

Troy, N. Y., June 14, 1851.

DEAR DOCTOR,—I was gratified by the receipt of a line from you, dated the 11th inst., and am glad to hear that the brevity of my communication on the poisoning case, was one of its faults. I believe I stated positively that Mrs. P. took 3ij. of arsenic of commerce. I did so, because, under circumstances of the kind, it would be exceedingly difficult to strengthen the belief in the verity of the case, in the minds of the medical men who saw her and noticed the case, by any corroborative or accumulative testimony.

The first knowledge which I had of the use of tobacco for poison (or the first hint, I might say) was derived from noticing it as denominated an alexipharmic in the antiquated and unpurged pharmaceutical works of centuries past—this term, in those works, being accompanied with some descriptive statements. The works themselves must now be considered of too little value to be referred to by name, unless on antiquarian grounds.

2d. Miss E., now the principal of the Troy Orphan Asylum (a post she has occupied little less than twenty years) described to me her own case of poisoning by arsenic (by accident), and the happy mistake of her being led to swallow an infusion of tobacco, which suddenly cured her. Miss E. is one of the most intelligent ladies of our age, and her respectable character would conspire to render the details of her own case of equal value with similar details from the pen of any well-educated physician.

3d. A lady in a town in New England, adjoining the one in which Miss E. then resided, also took arsenic by mistake, and the tobacco being relied on in the case, the cure was so sudden as to make the case equally wonderful with the previous one. Both of these cases were stated in a No. of Silliman's Journal, some two to four years previous to 1838, by a clergyman who resided near them. The statements were copied, years later, into other more ephemeral periodicals.

4th. Sept. 4, 1838.—Child of John Center, negro, aged about 4 or 6 years, fond of eating gravel, loam, plaster from the walls, &c., took a quantity, how much cannot be told, of arsenic mixed with old buckwheat flour. It was prepared to kill rats, and laid in a closet in a wooden or other dish, to which the child got access while the mother was out at work. The child said it had swallowed of it; its mouth was full of it, and hands also, and it was found greedily devouring the mixture. I was called to see the child between 5 and 6, P. M. I found it suffering great distress, with short moans—thirst, heat and tumefaction of the abdomen, some spasmodic action of the intestines and abdominal muscles. I returned home, a distance of four hundred and fifty yards, to examine the cases in Silliman's Journal, above referred to, and then hastened to prepare the infusion of tobacco. I poured a gill of boiling water on about one third of an ounce of cut tobacco, steeped it twenty minutes, but commenced to use out of it in three or four minutes, giving at short intervals, say five minutes, a dessert spoonful of the tea. Nearly all the gill was given. Confidence in the drug was strong; still I thought it prudent to give half a drachm of ipecac. in the tea. Slight vomiting was induced, and the *buckwheat batter* was thrown up. My note of the case was of slight importance, except as regards the time. I think I stated to the Society in Boston that at breakfast time, next day, the child ate a rusk (biscuit). This was probably accurately stated, but I now find that I made a minute in my account book, of a visit to that family on the fifth and also on the 6th September. The most striking fact which I noticed was, that the pain, and also the distension of the abdomen, abated before any emesis took place. To recapitulate, the child was previously in good health—took the flour and arsenic, was

soon in great pain. The other symptoms of the poison by arsenic occurred, except vomiting and diarrhoea. Relief soon followed the use of the tobacco infusion. I have no recollection of attending the child on the following two days, but presume that I should not have failed to call and notice its condition. No symptom of interest could have occurred on those days, save the singular recovery of the child.

May 25th, 1839, I was called to see Mrs. M., who took arsenic mixed with flour or meal three or four days before. She did it for self-destruction. The quantity is unknown. I was called upon in her case at the first, but not being at my office, she remained in the hands of another physician the term of time above stated. He used merely evacuants and demulcents. I attended her till the 9th of October following. Eventually rigidity and paralysis came on, and it was some two years before she could hold and use the needle. Nothing in this case occurred of interest regarding tobacco, except that I gave the infusion at short intervals, in moderate doses, for some three days from May 25. She always afterwards represented that she experienced marked relief from the tobacco.

In two other cases I gave the tobacco infusion. In neither case was it certain that arsenic in a dangerous quantity had been taken. In one of them the individual stated that she had taken a large dose of it, and hence, as a measure of prudence, I gave the infusion somewhat liberally. No dangerous symptoms took place from any cause.

In the other of the two cases, about three fourths of a grain was believed to have been swallowed, having been used in a hollow tooth. I preferred a moderate dose of tobacco infusion, to an emetic, in this lady's case, for special reasons. She suffered much from the headache for twenty-four hours, as did Mrs. P. in the recent case, doubtless from the tobacco.

It may now be inquired whether I use tobacco myself. I answer in the negative. But I know something of the effects of arsenic on the stomach, by personal experience. It was given me by accident, at the close of typhoid fever, in the dose of a teaspoonful of Fowler's solution. The spasm and the vomiting in the case first mentioned called forcibly to my mind the terrible action of that small dose of this active mineral.

Of Mrs. P. (the patient whose case is detailed in the first letter) I would state that she is not a person addicted to stratagem—is not crafty. She is of an irritable and violent temper, abusing, with the greatest freedom, a friendly neighbor, an unoffending child, or an amiable and kind husband. Further still from the manifestation of cunning or concealment, she will, when under the influence of even a small dose of any stimulating liquor, exercise the same temper without reserve, and with increased boldness. The occurrences of indications of increase in the number of her family charge, invariably occasions manifestations of great rage. On some such topic, a domestic ferment took place on the 23d April. She was throwing out threats, among which that of self-destruction was overheard by more than one person. On the above-mentioned day, she sent her daughter to the child's aunt for the loan of a few

cents. Having obtained them, she immediately sent the child (about 10 years of age) to a druggist's near by, whose clerk sold her 3 ij. of arsenic. This she carried to her mother, who had water warming on the stove, preparing to mix up the powder. At this juncture a Miss T., who, with her sister Margaret, was often in at the patient's house, ran into an adjacent room, saying that Mrs. P. was about to take some poison. She was in the next minute followed by Margaret, screaming out that she had actually taken the poison.

The statement given in the first two hours after it was taken, was, that her daughter begged her mother not to take the "poison," and was joined in the effort to persuade her by Margaret, who, finding her efforts likely to fail, seized her arm; that Mrs. P. pushed her away with one hand, while with the other she conveyed the poison, which was in a cup, to her lips, and swallowed it. Both Margaret and the little girl screamed—crying out, "why could you, mother?" &c., and ran out, notifying the neighbors, relatives and the husband, and calling for physicians in various directions. The unfortunate woman declined all treatment; but at a later period (as I am reminded by Dr. Bontecou, to whose notice these papers are committed) she seemed excited by pain and fear, and even affection for her little ones, and by that means, as well as others, already referred to, she was induced to struggle to escape the impending fate and to obtain relief. Hence she swallowed with some readiness the nauseous doses given her.

She admits to her husband that she really did take the arsenic, though to others she, apparently under the influence of shame and to avoid remarks, denies the fact. Her husband has no doubt that she *did* take the poison. I should state that the druggist carefully labelled the package, "arsenic," "poison," according to law. The labelled paper I saw, as did others, when it was picked up from the floor.

There was no suspicion, irregularity, or unnatural absence of correspondence in the detail of events, and the progress of symptoms in the case.

Yours truly,

AVERY J. SKILTON.

OVARIOTOMY.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—The subject of the following notice was about 45 years of age, and had ever, until recently, enjoyed good health. Several years since, a tumor appeared in the lower region of the abdomen, which gradually increased in size until this cavity was completely filled by it. So excessive was the dilatation at my first interview with the patient, I could detect no distinct tumor; and for the double purpose of investigation and of relieving the patient of a distressing burden, thirty-seven pounds of turbid serum were withdrawn—without, however, revealing a tumor or cyst; its collapsed body had descended into the pelvic cavity. Further explorations were postponed for a space of twenty-three days, when the distended tumor was again rapidly rising into the abdomen. Its superior outline was well defined, forming an arc which was surmounted

by two small globular bodies, and it acquired its subsequent development with great activity. No doubt could now be entertained that the dropsy was encysted, and the practical consideration of the case involved the propriety of extirpation of the cyst. It was beyond all question certain that the patient's life would be terminated by the disease at no distant period, and it was also considered that as far as her physiological condition was concerned, there was reasonable expectation of recovery from an operation. These opinions resulted from careful examinations; and as the patient was solicitous to take the issue of an operation, it was performed.

The integuments were divided, the serous contents of the sac discharged, and the abdomen opened by an incision twelve inches in length, which freely exposed the mass of the collapsed tumor. It was without adhesion, and was attached to the ovary and broad uterine ligament by a short pedicle, which was secured by a double ligature and divided. The abdominal incision was then carefully closed. The operation presented no difficulties, the respiration and circulation were unembarrassed, and when the patient awoke from her induced slumber, she expressed her gratification that the operation was, as in all respects it seemed to be, auspiciously concluded.

Aside from the tumor, the pathological condition of some of the internal viscera was unpromising. As it was possible to excise the cyst without displacing the uterus, this organ was not seen, but some apprehension was caused by seeing that the intestines were in a state of congestion, which was hoped to be due to protracted pressure, but which was unquestionably the remote cause of death. The tumor was an immense unilocular cyst, bearing upon its walls the protuberances already alluded to. The walls of the cyst were thin, dense, and of a white glistening appearance. So slight was the mass of this singular tumor, a quart cup would contain it; yet when distended, its dimensions were enormous. Union of the wound was accomplished at the end of the fourth day, and for several days more the prospect of recovery was encouraging. There had been slight manifestations of intestinal inflammation, which appeared to subside favorably, but vomiting and constipation, too obstinate to be overcome, occurred, and the patient sank on the twelfth day from the operation. An inspection, after death, revealed a gangrenous condition of the intestines and parts adjacent to the pedicle.

I was associated with Dr. Brooks, of South Hadley, in this interesting case, which received from him his assiduous attentions.

I will take this occasion to express the opinion that the usual method of securing the arterial vessels of the pedicle, is not very creditable to science, however necessary it may be thought to be for the safety of life. The irritation caused by ligature upon large masses, by contact with peritoneal surfaces, and especially by maintaining an aperture for the admission of air into the abdominal cavity, must be a very serious obstacle to recovery. In the present case, I regretted that I allowed the ligature to remain, for without the least difficulty the open mouth of every vessel was seen and tied *separately* before closing the abdominal incision. I think the chances of recovery would be essentially enhanced

by dispensing altogether with this clumsy contrivance after the vessels are individually secured by a close-cut ligature.

Respectfully yours, JAMES DEANE.

Greenfield, July 4, 1851.

EXCESSIVE MEDICATION INDUCED BY THE USE OF NOSTRUMS.

FROM THE PRIZE DISSERTATION OF DR. J. C. SEWALL, OF NEW YORK.

Among the most prominent of the pernicious influences of nostrums, is the habit of medication they foster. Works upon family medicine, it is well known, through the effects they create upon the imaginations of parents, afford the dispensers of drugs by no means the smallest share of their gains. The child is ailing, perhaps, from over feeding, or from some trifling disorder, needing merely abstinence and a little care for its restoration. The medical guide-book is at once consulted by the anxious mother, who, in the array of symptoms presented as incident to the affections of childhood, fancies she traces the very case of her offspring, and an invincible feeling prompts her to resort to the alleged means of cure. It is astonishing how far the imagination may carry us in this respect. I venture to say there never was a medical student, who, in the first year of his pupilage, did not fancy himself afflicted, and that, too, grievously, with every malady that came to his notice, whether in books or at the bed-side. I never shall forget, in my student life, giving every innocent man whom I met with an axe on his shoulder, a wide berth. I had been reading that day of surgical accidents. So it is with nostrums. Their introduction to the public is in most cases a popular treatise on diseases, a family medical guide, where the ills of humanity are glowingly portrayed, and their ready submission to the nostrum in question vividly illustrated. By arresting the attention, they arouse the imagination of the reader, till he feels himself an invalid with a strong impulse to resort to the proposed relief. Many diseases are thus produced, while others are increased and perpetuated, the attention being directed to the disordered part; while employment, which diverts the attention from disease, often cures it. It has been well said, that "attention to any part of the body is capable of exalting the sensibility of that part, or causing the consciousness concerning its state to be affected in a new manner. Thus a man may attend to his stomach, till he feels the process of digestion; to his heart, till conscious of its contractions; to his brain, till he turns dizzy with a sense of action within it; to any of his limbs, till they tingle; to himself, till tremblingly alive all over; and to his ideas, till he confound them with realities."

Imaginary diseases, those which are by far the most difficult to manage, and which often produce more unhappy consequences than real ones, are thus induced. The appetite grows by what it feeds upon. When one nostrum fails, another is resorted to; and numbers are thus successively consumed, till the individual who, at the outset, may have had no disease at all, or at the best some trifling one, becomes a confirmed invalid, weak in body, and weak in mind.

This habit of medication has further one most serious difficulty connected with it, well known to the experienced practitioner, and most carefully guarded against by him, which the public should well understand. It is that the effect of medicines, the safest as well as the most dangerous, when often taken, is to continually become more and more inoperative. The system, through its physiological laws, becomes itself habituated to their reception as well as the patient to their procuring, so that a dose which to-day would answer all the purposes required of it, a fortnight hence would prove entirely ineffectual unless it were doubled and trebled. The dealers in nostrums have ingeniously availed themselves of this principle, and are constantly urging upon their patrons, as a reason for any inefficacy of their compounds, the want of a sufficiently large potion, a reason felt to be most plausible by the consumer, through the demands of a disordered fancy, especially as he is told that the ingredients are harmless. It is on this account that, in these days, many of the most noted secret remedies are launched upon the public in half-gallon bottles, that compounder receiving the most applause who will give the most medicine for a shilling, as if those who imbibed the most were the soonest to be reinstated in health.

The injurious effects of nostrums in fostering disease, and encouraging undue medication, is especially evident during the prevalence of epidemics. Both in their use and in the manner of their diffusion, they interfere with and essentially contract those sanitary arrangements which, at such times, are established for the good of the public. Abundant opportunity for testing this was presented within the last year, while the Asiatic cholera was rife in our principal cities. I am abundantly sustained, by those most conversant with this scourge, in the statement that one large element in determining its attack in individual cases, and powerfully conducing to its fatality generally, was that of fear operating upon an imagination excited by the perusal of inflammatory notices accompanying nostrums universally paraded as preventives. It is a matter fully established, that in numerous cases of those predisposed to this disease, the use of such nostrums was the direct source of its manifestations. So far was this drugging mania carried, that I knew directly of two cases of slight general indisposition, and indirectly of many more, where a certain secret remedy, made to bear the double duty of a liniment for horses, and a cholera preventive for men, was freely partaken of. I do not now, however, refer so much to the direct uses of these nostrums, as to the pernicious influences brought to bear by unprincipled men, at such times, upon communities through their stimulating fears of exaggerating dangers already sufficiently appalling; by excited appeals to the public, setting forth, with all the powers of rhetoric and logic, that in their remedy lies the only avenue of safety. If our boards of health could take efficient measures to suppress the interested publications of venders of nostrums, circulated assiduously among all families in the season of epidemics, and calculated to arouse a universal panic, they would, without doubt, effect as much benefit, as in restraining other, perhaps more palpable, but not a whit more injurious nuisances.

Transactions of the Med. Society of the State of New York.

TREATMENT OF ASPHYXIA FROM DROWNING AND HANGING.

FROM DR. D. H. STORER'S ADDRESS BEFORE THE MASS. MED. SOCIETY.

How little understood, among many of the well-educated and intelligent in our community, is the treatment for the restoration of the drowned! How many lives must have been sacrificed by the barbarous custom of suspending the asphyxied by the feet, or rudely rolling them upon barrels with the head dependent, for the purpose of freeing the lungs of the water with which they were supposed to be filled!—a custom which, within a few years, has fallen under my immediate observation.

How many, apparently dead, have been restored to their afflicted friends by means of long-continued, scientific efforts; by having their bodies carefully dried, and exposed to a moderate temperature—their heads and shoulders elevated—their lungs artificially inflated; by the exhibition of external and internal stimulants, and judicious venesection!

How many have thus been resuscitated, after all human means seemed unavailing—long after the by-standers have ceased their efforts, and none, save the almost frantic parent or child, have in silent prayer continued their exertions! Numerous cases might be cited to show that life has been re-called after a body has been immersed for a very long period. These instances should cheer the desponding, and encourage them to labor while there seems the slightest possibility of restoration. Allow me to illustrate this remark with a single example, which was published during the last year in the "Northern Lancet and Gazette of Legal Medicine." It was communicated by Charles McNeil, Esq., of Charlotte, Vt., and is the touching story of a grateful father. "One of my sons, 9 or 10 years of age, was on Sunday afternoon, in August, 1830, found to be missing. On inquiry, I ascertained that he had last been seen playing on a boat lying at the wharf. The day was calm, and the waters of Lake Champlain still and unruffled by a ripple; but, knowing that he had been on the boat, his brother was sent to search for him, but he returned without any tidings. Once more he returned to the boat, and, looking carefully in every direction, discovered him lying on the bottom of the lake in eight feet of water, where he must have lain half an hour, if not longer, when he was brought to the surface. I received the body: it was rigid and cold, as also were the limbs; a bluish cast was spread over the countenance; the deep solicitude of a father discovered no signs of life—no heat; the heart was stilled, and the lungs quiescent. No more would I have anticipated the presence of life, if he had been submerged for several years; and had I not, some days previous to the accident, providentially read in an old paper an article by Dr. Buchanan, of Philadelphia, on the subject of restoring suspended animation after submersion, we should have consigned the body to the grave, as it was recovered from the lake. The body being placed on a bed, some of the neighbors were directed to rub it briskly with flannel cloths—an order which they obeyed with great reluctance, from the thought of performing this office on a corpse; and I will admit that I somewhat entertained the same opinion. Still, I would fain hope, and urged on my friends the continuance of their exertions; the

friction was persevered in ; warm flannel sheets were applied in rapid succession. This treatment was continued for thirty or forty minutes, when we were gratified by hearing a feeble murmur in the throat, followed soon after by a slight quivering of the lips. The case, however, was enveloped in doubt and obscurity for a long time, as the recovery was extremely slow."

The above remarks might, with equal propriety, be applied to the subject of hanging. Many judicious general practitioners entertain the most vague and unsatisfactory notions regarding its phenomena. They not only are unacquainted with the several appearances produced in individual cases of suspension, but they really are not aware how death is produced ; and, cerebral apoplexy not unfrequently being considered the cause, copious depletion, employed instead of artificial respiration, checks the vital current forever.

CASE OF STRICTURE OF THE URETHRA.

BY JAMES F. CRUKSHANK, M.D., DALMELLINGTON, Ayrshire, SCOTLAND.

THE recent introduction, by Mr. Syme, of a method of treating stricture of the urethra by incision, has brought within the range of surgical relief a certain class of cases, which hitherto have been regarded as irremediable by the usual method of dilatation, and which in some cases even demanded immediate relief by puncture of the bladder. But as new methods of operating are generally slow in being adopted, more especially when such surgical interference finds a place among the minor operations of surgery, I think that medical men, and chiefly those practising in large country districts, are bound to record their experience, when they have had any opportunities of putting new methods of cure to the test. Upon the principle, also, that every case ought to be recorded in which any new operation has had a fair trial, whether the result shall have been favorable or not, I beg to publish the following case. I have withheld its history till now, for this reason, "That strictures which have been cured in the ordinary way, by dilatation, are often apt to return in some degree upon exposure to cold and wet, even when gonorrhœa has not been again contracted."

About the beginning of November, 1849, James Macrae, a miner, 45 years of age, and of rather intemperate habits, consulted me regarding a stricture of the urethra, from which he had suffered with more or less severity for about three years, the result of an acute gonorrhœa, which had lasted some weeks, and had given way under the ordinary treatment, without injections.

The stricture was a very tight one (admitting with difficulty No. 2 bougie), and situated at the bulb of the urethra. During a period of about two months I continued to dilate it regularly, in the usual way, by the introduction of metallic bougies, till No. 8 of the scale could be introduced. Gradually, however, he began to suffer much pain from the passage of the instrument through the canal, and latterly had rigors, succeeded by severe constitutional irritation, which confined him to bed

for some days. I did not venture to introduce the bougie for more than a week after his recovery from this attack, and on doing so, I found that the stricture had contracted to its original size, so that I could with difficulty introduce bougie No. 2. A small hard swelling, with indistinct fluctuation, now appeared at the seat of stricture. Being under the necessity of working constantly, and, from the nature of his employment, to sit on the wet ground (circumstances which tended to aggravate his complaint), he was naturally anxious for some effectual and speedy cure. At this time I had occasion to be in Edinburgh for a day or two, and availed myself of the opportunity of seeing Mr. Syme perform his operation for the relief of stricture upon two patients. I determined, accordingly, to try it; and, on the 30th January, 1850, with the ready consent of the patient, and the help of my assistant, the late Dr. McCordy, I performed the operation as directed by Mr. S. I introduced a grooved bougie, of very small dimensions (about No. 2), and made an incision in the raphe of the perineum, over the seat of stricture, which I completely divided. On making the incision, a small quantity of matter escaped, which had formed in the tumor I have already noticed as existing. I then introduced No. 9 catheter, which was retained during forty-eight hours, without much uneasiness. The urine continued to come by the wound for five days, when it began to flow by the natural channel; and in three weeks after the operation, he was able to resume his work, the wound having healed slowly and well. I introduced catheters Nos. 11, 12 and 13, once a-month for three months, with ease, and without pain or rigors. He then left this part of the country, and I saw no more of him till about the end of March, 1851, when he appeared quite well, and informed me that he had been constantly at work since his recovery from the operation; and, in order to test the efficacy of the cure, I introduced No. 13 bougie without the least difficulty.—*Edinburgh Monthly Journal of Medical Science.*

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BOSTON, JULY 16, 1851.

Prague.—In good time, after having seen all worth particular investigation in Vienna, I arrived at Prague, the capital of Bohemia, the residence of the late Emperor of Austria, who abdicated the throne in the late revolutionary struggle. A more beautiful country cannot be found than the part travelled over, from the borders of Dalmatia to the head of the Adriatic, and from Trieste to Dresden. It is a perfect garden in point of cultivation, the whole way. At Brunn, in Moravia, is a frowning fortress on the top of a hill, where political offenders are imprisoned. Olmutz, where Lafayette was incarcerated, is not far off. Being near Presburg, it was no difficult matter to look into Hungary. There is a celebrated Champaigne wine factory near Brunn, in which that favorite and aristocratic article is manufactured out of cider and potatoes, without the aid of a solitary grape. Even at the door, it costs a florin, or nearly fifty cents, a bottle. Not a

quarter imported into the United States is made of grape-juice. Coal is quite plenty, and particularly lignite, in Bohemia. Never did man gaze on lovelier fields. Not a fence encumbers the ground, and rural economy is carried to the highest degree of perfectibility. No hamlets or houses are dotted over the broad acres, as with us. On the contrary, all the peasantry reside in extensive villages. They have a singular fancy for long tight-fitting hoots, red breeches, and broad-brimmed hats, which give even the boys a mature look. They all smoke, too, as though life depended on their activity at the stem. There is a romantic sprinkling of dilapidated castles on the route, with some extensive convents, which are rich in lands.

Early in the morning after my arrival at Dresden, a hasty but satisfactory visit was made to the General Hospital, an institution very similar to its namesake at Vienna—smaller, however, yet, in all its details, in no way inferior. It contains 800 beds, and can accommodate from 700 to 800 patients. At all times, it appears, on inquiry, to be nearly full. A school of medicine is united with it, under the control of an eminently learned faculty. Professor Pitha has the chair of Surgery, and Prof. Engel that of Pathological Anatomy. While in the dissecting room, looking into its arrangements, a subject was under inspection by a student, who was explaining to a class of fellow students the abnormal condition of certain organs. In the group was the professor himself, Dr. Engel, listening with apparent satisfaction to the nice discriminations of a pupil—ready, probably, to correct any mistake. This is an admirable scheme, and might, with profit, be introduced into other schools. An immense military hospital is near by, under the exclusive direction of the staff surgeons of the army. The civil, or, as it is commonly called, the general hospital, has some fine wards, but, as a whole, they seemed too small. Perhaps there may be advantages in cutting up a large building into little rooms. The bedsteads were all of wood, the linen was clean, and an orderly appearance characterized the institution. The faculty of the school are its physicians and surgeons, under salaries of 3000 florins per annum each, or about \$1000 of our currency. There are two lecture terms in a year, of five months each, attended, upon an average, in Prague, by about 150 students. Five and a half years are required to study medicine and its concomitant branches, before a degree is conferred or the student is allowed to practise. Six months residence in the lying-in hospital, another contiguous institution, in which there are from 4000 to 5000 births a year, is required, before obstetrical practice can be embraced in his professional circle of business. Different degrees are conferred in succession, as doctor of medicine, doctor of surgery, doctor of midwifery, &c.

In the cluster of medical and kindred charities, is the asylum for the insane. A part of the building was formerly a convent. A noble garden is thrown open to the patients, in which they recreate, while their cure is progressing. Both here and in the hospitals, the general plan of daily attentions does not vary from similar institutions of the best kind in Europe and America. The view from all of them is extremely beautiful. A uniform plan of proceeding characterizes the medical schools and hospitals all over the Austrian dominions. Whatever is done in one, is, as a general rule, practised in all. Some of the best medical minds in Germany are to be found at present at Vienna, Prague, and Berlin. Two new schools, as they begin to call themselves—although nothing but cliques—are arrayed against each other. One deals alone in remedies that act almost, if not entirely, so they hold, as specifics. Thus iodine, mercury, arsenic, and

such articles, under the vulgar appellation of Samsons, are regarded in the light of essentials, while all other substances of the *materia medica* are but make-weights, or thrown in, as sugar is into tea, to give a palatable flavor. The other teaches the agreeable doctrine, that diseases must be *fed* out of the system, as a boa constrictor is surfeited before he can be handled with impunity. Nothing equals roast beef and pudding—the more the patient has of both, the better. People are in favor of this—for they say it is natural, the stomach being made for the reception of food; and when does one need it more, or of a better quality, than when prostrated by disease?

A medical gentleman of distinction spoke of the remarkable success of the German quacks, beer makers, furriers, and similar artisans, who had established themselves all over the United States, as homœopathists and hydropathists. Why, not one in forty of them would be permitted to mix a dose of sulphur for a cat in their fatherland. He knew very well the love of our countrymen for foreign impostors, and especially if they announced themselves as physicians. All Germany does not, I imagine, contain so many of these humbugs as the New England States, New York and Pennsylvania.

Prague is an old Bohemian city, containing various objects of historical renown. In the old section, the multitude of minarets, spires, high-pointed roofs, and deep, dark, antique windows, together with the massiveness of the walls, keep a stranger in a constant state of surprise, as he passes from street to street. Some of the public fountains are unique specimens of bronze castings. In the old cathedral, which was never finished and never will be, there are monuments of singular beauty and richness. A certain St. Vincent seems to be a peculiar favorite—for in one corner where his statue stands, the walls are covered with broad sheets of costly stones, stuck into the plastering without any reference to close joints or harmony of coloring. The tomb of Charles IV. is too large even for an emperor; but a shrine and sarcophagus of a St. somebody, whose name is forgotten, on which 3000 pounds of pure silver have been wrought into full-sized statuary of angels, and such beings as the artist imagined waited upon saints in paradise, nearly comes up, in workmanship, to the magnificent display of silver apostles exhibited at Naples. The latter, however, exceed in numbers, for in Prague there are only a few figures, while at Naples the chapel is proud of numbering a goodly list of apostles and holy personages of the church militant, amounting to thirty-eight—all of pure silver.

A stone bridge that spans the Moldau, called the Bridge of Charles IV., the sidewalks of which are covered all the way with cast iron plates, while the railing, at suitable distances, is laden with colossal statuary, is one of the lions of Prague. A modern suspension iron bridge, within half a mile of it, which is a noble and triumphant evidence of the modern mechanical skill of Bohemia, finds fewer admirers than its old battered neighbor. On the way to the picture gallery of Count Steinberg, a meagre collection, having no special claims, we saw the old Emperor of Austria, Francis I. whose residence is in a palace near the Cathedral. He rides in state—has a heavy guard posted about the premises, and seems to be a special gazing post, for the multitude run for a view of him when he moves out, which is known by the sudden swell of music. He is a short, rotund man, with light hair, of a mild countenance, without much force of expression. His obstinacy is fully developed—for he broke rather than yield to the demands of the people in 1848—and by abdicating the throne, he made way for

another, the nephew, who is just beginning to try his half-fledged, imperial pinions. Prague, with a population of 120,000, seems to abound with soldiers and officers. The standing army of Austria is frightfully large to those who are hoping for better times. The old monarch was a twin fool of Louis Philip—both aimed at unconditional despotism, and lost all they had. A few of the inhabitants of Prague are eminently learned—and all are civil. Most of the two professions, law and medicine, are liberal in political sentiments—while the clergy, finding Austria a heaven-upon-earth so long as the present regime endures, demand no changes. Disease and death are the only democrats in Austria that have no fear of the church or the court. Here, as elsewhere, they strike down alike the rich and poor, the high and low, without manifesting a particle of respect for either. The paper money here is a miserable, depreciated currency, and perpetually becoming worse. Silver and gold are rare sights. The only mode of making change, in all ordinary business transactions, is to tear a bill in two. These portions are as low as six cents, the extent to which a bill can be torn—the bits being fractional parts of a florin. These bills are a legal tender. There is nothing cheap in Austria but silk vest patterns. Railroad fare is almost double what it is in New England. No person can move from one place to another, even for an afternoon excursion, without a passport from the bureau of police.

Meeting of the Franklin Medical Association, and of the Franklin District Medical Society.—A meeting of the Franklin Medical Association was holden at Shelburne Falls, on Wednesday, July 2d. The meeting was called to order by Dr. A. F. Stone, of Greenfield, President of the Association. After the usual business of the meeting, Dr. S. W. Williams, of Deerfield, by request, gave some account of his late tour to Northern Illinois and Southern Wisconsin, in which he described some of the Indian tumuli, and their contents, which he examined on Rock River, Illinois, and at Beloit in Wisconsin. He exhibited specimens of human bones, and of clam shells, which he took from some of those Indian mounds. Dr. Bates of Charlemont, Dr. Stone, Dr. Tabor, Dr. Deane, Dr. Duncan and Dr. Williams, verbally reported some interesting cases which had occurred in their practice. These cases were of great practical value. At 12 o'clock, M., the President called upon Dr. S. W. Tabor, of Shelburne Falls, to deliver the address he had been appointed to prepare at a previous meeting. The delivery of it occupied more than an hour. On motion of Dr. Williams, it was voted—That the thanks of this Association be presented to Dr. Tabor for his able and elaborate address delivered on this occasion, and that he be requested to deposit a copy of it in the archives of the Association. Adjourned for three quarters of an hour, when the members partook of an excellent dinner, prepared in Merrill's best style. The neighboring streams furnished his guests with an abundance of most delicious trout. In the afternoon Dr. C. W. Knowlton, of Ashfield, was appointed to deliver the next quarterly address. The meeting was then adjourned to the town of Orange, there to meet at 10 o'clock, A. M., of the first Wednesday of October next.

Immediately upon the adjournment of this meeting, an adjourned meeting of the Franklin District Society of the Massachusetts Medical Society was holden in the same hall. It has not been previously announced in this County that this branch of the Massachusetts Medical Society was

organised at Greenfield on the first Wednesday of April by the choice of Dr. Stephen W. Williams, of Deerfield, *President*; Dr. James Deane, of Greenfield, *Secretary and Treasurer*; Dr. Alpheus F. Stone, *Librarian*; Dr. A. F. Stone, Dr. S. W. Williams, Dr. W. Hamilton, *Counsellors*; Dr. E. W. Carpenter, Dr. Duncan, Dr. Tabor, *Censors*. At this meeting Dr. Duncan was appointed to prepare and deliver an address before the Society on the first Wednesday of September next, at 10 o'clock in the morning. A respectable number of the physicians in the County were voted into the Society at this meeting, and accepted their appointment. The Society consists of all the members of the Massachusetts Medical Society residing in the County, besides many others who have recently been elected. It is hoped and believed that every qualified licensed physician in the County will shortly become a member of it. It was voted to request every member to prepare reports of such interesting cases as may have occurred in his practice, and relate them to the Society at the next meeting at Greenfield.

These meetings were attended by a respectable number of physicians from various parts of the county, and the utmost harmony and good feeling prevailed. We trust that in future they will be productive of great good in the community.

The meeting of the District Medical Society was adjourned to meet at Greenfield on the first Wednesday of September next, at 10 o'clock, A. M. It is hoped that a full and punctual attendance may be had at that time, not only of the present members, but of all other regular physicians in the County who may be desirous of uniting with the Society. W.

Vital Statistics of Louisiana.—Dr. E. H. Barton, of New Orleans, president of the medical society of the State, has been so long before the public as an accomplished, talented, persevering medical philosopher, that whenever anything appears with his name appended, it is taken for granted to be excellent. He some time since delivered a discourse, or rather made a report, to the association over which he presides, on the meteorology, vital statistics and hygiene of the State of Louisiana, that appears to have produced an unusual sensation on the non-medical class of the community. Thirty-six gentlemen, of the highest respectability and intelligence, came to the common-sense conclusion that the medical society ought not to monopolize all the useful knowledge spread out before it, and consequently they very properly invited the doctor to favor them with the printed report, embodying "correct statistics of the mortality of the city of New Orleans and the State of Louisiana, that comparison may be made with that of other cities and States, in order to remove the unfavorable impression existing in regard to the health of this section of the Union." That people die, and have in past times died, in New Orleans in appalling numbers, is most certain; while various publications make it clear as noon-day that it is one of the healthiest residences in the world. In explaining the true state of the matter, it has been no part of Dr. Barton's effort to go farther than he was strictly warranted by facts; and it is only doing him simple justice to say that he has produced a masterly document, which, were it the only one from his pen, would have been the basis of a well-earned reputation. If we could re-publish the tables, or transfer to these pages a tithe of his researches, it would be rather unjust, than otherwise, since the whole mass should be studied in course to realize the full value of the pamphlet.

New York Academy of Medicine.—Part I. of the first volume of the Transactions of this institution has been published by the Academy, and the receipt of a copy of it is gratefully acknowledged. We have rarely examined a series of medical and surgical papers with more satisfaction. If any of the articles in the collection are calculated to strike the reader with interest above the rest, those of Dr. Mott are the ones. He has the advantage, in the first place, of an extended surgical reputation, which would naturally give a prominence to whatever he chooses to give to the professional public. In these papers, however, he has presented extraordinary cases, for precedent in practice, and related them in a perfectly agreeable, conversational manner, that gives additional value to the facts. His success in tying the left subclavian artery, and the restoration of the patient, beset as the operation was with unexpected difficulties, is a triumph; and if he had never performed any other extraordinary feat for saving a life in peril, this alone would have given him a commanding influence and fame. Dr. Van Buren's amputation at the hip-joint, followed by a perfect recovery, is equally a marked case, evincing the skill, carefulness and energy of the operator. Although the historical sketch of the insane institutions of the United States, by our friend, Dr. Earle; Dr. Buck's article on tracheotomy in croup, and Dr. Metcalf on the history and use of chloroform, are excellent, we cannot allude to them more particularly, and therefore close these observations by saying that the Academy is conferring peculiar favors upon the whole brotherhood of practitioners, when it sends forth a publication like this.

New Sign Language for Deaf Mutes.—It so rarely happens that any thing really new is suggested in any department of ordinary life, that when it is done, the multitude express alarm. A large part of mankind are unwilling to have the sedimentary deposits disturbed, but prefer that the mass should go on hardening by the weight of accumulation, till a great rock is finally produced, in which all improvements are hermetically sealed up, like fossil remains, perhaps forever. A young gentleman, Albert J. Myer, who lately presented a thesis for the degree of doctor of medicine at the University of Buffalo, deviated from the beaten track of writing a learned discourse upon subjects with which students cannot be very familiar, and boldly marched up to the faculty board with a novelty, something that was his own, and not borrowed, or stolen. We are exceedingly gratified that the professors have done themselves the honor to acknowledge his merit, instead of turning him back because there was in his thesis neither the odor of jalap or calomel, directions for mending broken bones, physiological scraps, or soft soap for the college. Dr. Myer has projected a new mode of conversation for the deaf and dumb, not unlike the dots and lines in telegraphic language, the most rapid and accurate scheme of expression, short of articulate sounds, ever devised. He proposes that the fore finger, for example, striking upon the table, should represent the armature of the electro-magnet. Thus a tap or a prolonged pressure would represent, as in Bain's alphabet, a dot or a long mark. Each and all of these movements are to represent letters, which combined, make words and sentences. This is a mere outline of Dr. M.'s theory of a new sign language. Were it adopted, the perpetual rambling of the mute's hands through space, and the arbitrary, ungraceful crookings of the fingers, the homely symbols of the working of the mind, would be obviated, while the

facility of expression would be increased a hundred fold. There can be no doubt that those having charge of institutions for deaf mutes, will at once give the system a fair trial.

India Rubber for keeping Water pure.—It occurs to us to mention a kind of discovery in regard to the preservation of water, so that it may at all times be potable, which may be of service to future travellers circumstanced as we have been, in tropical regions where no water is to be found, and that important element is necessarily carried from one extreme point of country to another. On leaving Cairo, to ascend the river Nile, the last autumn, about two gallons of river water was put in an India rubber bag, securely corked, and placed in the hot sun, on the deck of the boat. On reaching the first cataract—the labor of some weeks—the water was found to be excellent, there being no escape of gas on withdrawing the cork, nor any degree of odor, which was an evidence that no fermentation, or working, as the sailors term the process, had taken place. It was kept in the same exposed condition all the way down that remarkable stream, and at the end of six weeks had apparently undergone no change whatever. One week after, an expedition was started in the desert, and at the horn of a camel's saddle, water in the same bag was suspended in a travelling sack, twenty-one days, under the direct rays of the sun. From time to time, as inclination or necessity prompted, a swallow of the precious fluid was taken, and it was really delicious. Water carried in the whole skin of an animal, in the ordinary manner, for general use, became excessively offensive, in the desert, in a few days, besides assuming the color of a pale decoction of coffee. Now this is a simple statement of the difference of the quality of the water in the two receptacles; and is it not obvious that the India rubber one possessed manifest advantages over the other? Whether the preservation of the water was due to the utter exclusion of atmospheric air, or the influence exerted upon it by the material itself, remains to be ascertained. The peculiar turpentine smell was occasionally rather strong, under an Asiatic sun, yet the taste of turpentine was not detected.

In wooden casks, another method adopted by travellers, the changes wrought on the water in a short time are analogous to those brought about in water tanks at sea. It would be worth while to send a supply of the India rubber water bags to Cairo, Alexandria, and other starting points, if the natives had the means of purchasing them; but at the usual high prices of India rubber goods in this country, it would be literally impossible for the nomadic wanderers, who have but little money, to buy them. There is no valid reason why these articles should be so insufferably dear. A little more rivalry would perhaps bring prices to a come-atable standard.

Visit to the Great Pond Mining Company's Works at Cape Elizabeth.—As mention has been made, in previous numbers of the Journal, respecting a newly discovered deodorizer, we have thought a more extended notice of it would be interesting to the readers of the Journal. Having occasion to journey eastward, we concluded to avail ourselves of the chance to visit the works where it is prepared, and to examine thoroughly into its relative merits. At Cape Elizabeth, about six or seven miles southeast from the city of Portland, and within 80 rods of the broad Atlantic Ocean, was once a very large pond, containing some 500 acres. This pond has, at a very great expense, been drained. It was found, after the waters had been drawn off, that the principal part of the bed was composed of what is

termed peat moss, varying in depth from 5 to 20 feet, and possessing some most remarkable properties. It was the intention of the company which own the property, to have simply converted this peat moss into fuel; but from the result of their experiments upon it, when prepared in a particular manner, they found it to possess in a very high degree the property of destroying odors, and also that of a fertilizer, which at once changed the plan of their operations. Preparations were soon made to manufacture it on a large scale, and with the facilities they now have, they are able to supply 1000 barrels a week. There is something connected with this fungus which struck us as very remarkable. Little twigs, leaves, and even branches of trees, completely charred, were found imbedded in its substance. One would suppose that the lake was once a forest, and had been burnt over; but tradition furnishes evidence that for more than 200 years it has been a great pond, 60 or more feet deep. Within that period, it has been observed by the inhabitants to have become more shoal, and at the time of its drainage it did not have a depth of over 7 or 8 feet in any of its parts. This change must be supposed to be owing to the growth of this peculiar moss from the bottom of the pond; and as it has been observed to grow at the rate of 5 inches a year, it will be perceived that it would not have taken many years to have displaced the waters entirely. There are several springs in and around the bed of this pond, all of which furnish water in immense quantities, and are called living springs; the water, for the most part, being potable and cool. Within 50 feet of one of these springs, is another, possessing medicinal properties, the water of which is used by the laborers at the works as a laxative. There is an immense bog of iron ore on the premises, out of which issues a bubbling spring of clear cold water, impregnated, of course, with iron. Upon the exposure of the decomposed moss to the rays of the sun, crystalline masses are at once formed, having a very styptic, metallic taste; in fact, the whole bed of this lake seems to be saturated with some peculiar saline matter, which as yet has not been perfectly analyzed. It is truly a remarkable substance, and we very much doubt if a similar one could be found in the United States, or even in the whole world, particularly in such quantities. From 30 to 40 laborers are now engaged in preparing from the peat the deodorizing powder, which by the aid of a powerful steam engine they are able to do with the greatest ease and despatch. No one need fear that the supply will become exhausted, for it is believed that the raw material is inexhaustible, and that the whole state could not furnish men enough even to cut the peat in 100 years. The place must be seen, in order to have a just conception of its magnitude. There can be no doubt that the demand for the deodorizer will become very great, and it is gratifying to know that it can at all times be furnished. To Drs. Buzzell and Smith, of Cape Elizabeth, we are much indebted for kind attention while visiting the works, and we sincerely hope that the zeal which they have manifested in originating and furthering this project, will be compensated by something more substantial than mere words of praise.

J.

DIED.—At New Haven, Ct., Dr. V. M. Dow, 55. "Dr. Dow was modest and unassuming in his manners, and free from all guile. He was well read in his profession, and was a judicious and successful practitioner. He always took time to investigate his cases, and his whole life was marked with prudence, discretion and sound judgment. He was universally esteemed and confided in by the community, and his death is a public loss."

At Jackson, Ill., Dr. Joseph K. Steen.—At St. Ann's, Canada, Michael McNaughton, M.D., 39; drowned by the upsetting of a boat.

TO CORRESPONDENTS.—A paper, in continuation of Dr. Tabor's History of Tobacco, and Notes on Medical Lectures in Philadelphia, by Dr. Constock, have been received.

Deaths in Boston—for the week ending Saturday noon, July 12, 55.—Males, 34—females, 22. Accidental, 1—disease of bowels, 1—consumption, 14—convulsions, 3—croup, 3—dysentery, 3—diarrhoea, 1—dropsy of the brain, 1—drowned, 1—exhaustion, 1—typhus fever, 1—typhoid fever, 1—scarlet fever, 1—measles, 1—brain fever, 1—hooping cough, 1—infantile, 6—inflammation of the lungs, 4—disease of kidneys, 1—marasmus, 1—old age, 2—peritonitis, 1—puerperal, 1—small-pox, 1—teething, 2—tumor, 1.

Under 5 years, 30—between 5 and 20 years, 5—between 20 and 60 years, 13—between 60 and 80 years, 8—over 80 years, 3. Americans, 26; foreigners and children of foreigners, 30.

The above includes 4 deaths at the City Institutions.

Tracheotomy.—This operation was successfully performed on the 3d of March in a case of *Edematous Laryngitis*, by Dr. W. D. Stephenson, of Mount Pleasant, Ala., assisted by Dr. E. P. M. Johnson. The subject was a young mulatto woman who had been confined a fortnight previously, and from exposure had contracted a cold, which resulted in such swelling of the parts about the glottis as threatened instant suffocation. All the general and local remedies usually applied in such cases having been resorted to ineffectually, and the symptoms growing continually more urgent, tracheotomy was determined upon. At this time the patient was in indescribable agony; her features were pale and shrunken; extremities cold, nails livid, surface bathed in a cold perspiration. The relief following the operation was instantaneous; a full, deep inspiration succeeded, and the patient was asleep. For a canula, the physicians substituted a vial broken in the middle, the neck being secured in the tracheal incision. "On the 12th of March," says Dr. S., "breathing was partly performed in the natural way, and on closure of the orifice, it was found that the patient experienced no difficulty in inspiration. The edges of the wound were brought together by a suture and adhesive strips, and on the 20th she was well."—*Western Jour. of Medicine and Surg.*

The concours for the chair of Surgery, in the Faculty of Medicine, Paris, has terminated in the appointment of M. Nelaton. His competitors were MM. Robert, Michon, Buisson, Richet, Gosselin, Giraldès, Jarjavay, Voilemier, Morel Lavallée, Chassaignac, and Lauson.

CASTLETON MEDICAL COLLEGE.—There will be usually two full Courses of Lectures in this Institution; the Spring Session commencing on the last Thursday in February, the Autumnal Session commencing on the first Thursday in August. Each course will continue four months, under the direction of the following faculty:

JOSEPH FERRIS, M.D., Prof. of Materia Medica and Obstetrics.

ERRA S. CARR, M.D., Prof. of Chemistry, and Natural History.

WILLIAM SWETSON, M.D., Prof. of Theory and Practice of Medicine.

WILLIAM GOLDENHUT, M.D., Prof. of Surgery.

WILLIAM C. KITTREDGE, A.M., Prof. of Medical Jurisprudence.

CORYDON L. FORD, M.D., Prof. of Anatomy and Physiology.

E. GIBNEY FERRIS, Demonstrator of Anatomy.

Fees.—For each full Course of Lectures, \$30. For those who have attended two full Courses at other Medical Colleges, \$10. Matriculation, \$5. Graduation, \$10. Board, including the expenses of room, fuel and light, can be obtained in respectable houses at from \$1.25 to \$2.50 per week.

Candidates are acceptable from Albany, via White Hall, and from Boston and Burlington via Rutland, by Railroads.

E. S. CARR, M.D., Registrar.

Castleton, Vt., June, 1851. Je 23—11.

MEDICAL INSTITUTION OF YALE COLLEGE.—The Course of Lectures commences annually on the last Thursday of September, and continues sixteen weeks.

BENJAMIN WILLIAMS, M.D., LL.D., on Chemistry and Pharmacy.

ELI IYER, M.D., on the Theory and Practice of Physic.

JONATHAN KNIGHT, M.D., on the Principles and Practice of Surgery.

TIMOTHY F. BRER, M.D., on Obstetrics.

CHARLES HOOKER, M.D., on Anatomy and Physiology.

HENRY FORDSON, M.D., on Materia Medica and Therapeutics.

Lecture fees, \$25.00. Matriculation, \$5. Graduation, \$10.

CHARLES HOOKER, Dean of the Faculty.

New Haven, July, 1851. 27—11.

UNIVERSITY OF PENNSYLVANIA. MEDICAL DEPARTMENT. Twenty-Sixth Session, 1851-52.—The Lectures will commence on Monday, October the 6th, and terminate about the end of March ensuing.

Theory and Practice of Medicine, by GEORGE B. WOOD, M.D.

Assistant, WILLIAM E. HORSNER, M.D.

Materia Medica and Pharmacy, JOSEPH CARSON, M.D.

Chemistry, JAMES S. ROBERTS, M.D.

Surgery, WILLIAM SWETSON, M.D.

Obstetrics and the Diseases of Women and Children, HUGH L. HORSNER, M.D.

Institutes of Medicine, SAMUEL JACKSON, M.D.

Clinical Instruction at the Pennsylvania Hospital, by GEORGE B. WOOD, M.D., and by GEORGE W. NORTON, M.D.

Dissective Instruction in Medicine and in Surgery, by the Professors of the MEDICAL FACULTY, assisted by W. W. GREENARD, M.D., and HENRY H. SMITH, M.D.

Practical Anatomy, by JOHN NEILL, M.D., Demonstrator.

Amount of Fees for Lectures in the University, \$105. Matriculating fee (paid once only), \$5. Hospital fee, \$10. Practical Anatomy, \$10. Graduating fee, \$30.

W. E. HORSNER, M.D., Dean of the Medical Faculty.

22 Chestnut st., above Thirteenth, op. U. S. Mint, Philadelphia. June 15, 1851. Je 25—11.

DENTAL AND SURGICAL INSTRUMENTS.—D. WALTHER & Co., successors to N. Hunt, manufacture and have for sale all kinds of Surgical and Dental Instruments and Implements.

Old Instruments ground, polished and repaired, at the shortest notice.

Orders will be attended to with promptness.

May 23—11 135 Washington street, up stairs.

PURE COD LIVER OIL.—Sold by PHILIP RECK & TRAFONT, Chemists and Physicians' Druggists, 150 Washington street, Boston. Oct. 18.

DR. HENRY W. WILLIAMS has removed to No. 10 Essex Street, where he will continue to give particular attention to Diseases of the Eye.

June 15—11.